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# REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS

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|---|---|
| Application Number | 10/679,904 |
| Filing Date | October 6, 2003 |
| First Named Inventor | Donato L. Ricci |
| Art Unit | 3722 |
| Examiner Name | Willmon Fridie, Jr. |
| Attorney Docket Number | 126321.00032 |

**I hereby revoke all previous powers of attorney given in the above-identified application.**

☑ A Power of Attorney is submitted herewith.

***OR***

☐ I hereby appoint the practitioners associated with the Customer Number: 26710

☑ Please change the correspondence address for the above-identified application to:

☑ The address associated with Customer Number: 26710

***OR***

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| City | | State | Zip |
| Country | | | |
| Telephone | | Email | |

I am the:

☐ Applicant/Inventor.

☑ Assignee of record of the entire interest. See 37 CFR 3.71.
*Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)*

**SIGNATURE of Applicant or Assignee of Record**

| | | | |
|---|---|---|---|
| Signature | John D. Franzini | | |
| Name | John D. Franzini | | |
| Date | 10/23, 2007 | Telephone | (414) 277-5747 |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☑ *Total of 1 forms are submitted.

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